

Fill in this information to identify the case:

Debtor Name _____

United States Bankruptcy Court for the: _____ District of _____

Case number: _____

☐ Check if this is an amended filing**Official Form 425C****Monthly Operating Report for Small Business Under Chapter 11****12/17**

Month: _____

Date report filed: _____

MM / DD / YYYY

Line of business: _____

NAISC code: _____

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: _____

Original signature of responsible party _____

Printed name of responsible party _____

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

Yes	No	N/A
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If you answer *No* to any of the questions in lines 1-9, attach an explanation and label it *Exhibit A*.

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Did the business operate during the entire reporting period? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you paid all of your bills on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did you pay your employees on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you timely filed all other required government filings? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answer *Yes* to any of the questions in lines 10-18, attach an explanation and label it *Exhibit B*.

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Did any insurance company cancel your policy? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Has anyone made an investment in your business? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Debtor Name _____

Case number _____

17. Have you paid any bills you owed before you filed bankruptcy? ☐ ☐ ☐18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy? ☐ ☐ ☐**2. Summary of Cash Activity for All Accounts****19. Total opening balance of all accounts**

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

\$ _____

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ _____

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ _____

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.

+ \$ _____

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ _____

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables*(Exhibit E)*

\$ _____

Debtor Name _____

Case number _____

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. **Total receivables** \$ _____
(*Exhibit F*)

5. Employees

26. What was the number of employees when the case was filed? _____
27. What is the number of employees as of the date of this monthly report? _____

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ _____
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ _____
30. How much have you paid this month in other professional fees? \$ _____
31. How much have you paid in total other professional fees since filing the case? \$ _____

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	Column A		Column B		Column C
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ _____	—	\$ _____	=	\$ _____
33. Cash disbursements	\$ _____	—	\$ _____	=	\$ _____
34. Net cash flow	\$ _____	—	\$ _____	=	\$ _____
35. Total projected cash receipts for the next month:					\$ _____
36. Total projected cash disbursements for the next month:					— \$ _____
37. Total projected net cash flow for the next month:					= \$ _____

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8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☐ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

WATTSTOCK LLC
Case No. 21-3144-sgj

EXHIBIT C

Cash Receipts

12/15/2021	Refund Service Charge	\$30.00
	Total	\$30.00

EXHIBIT D

Cash Disbursements

12/01/2021	Security Retainer for Munsch Hardt Kopf & Harr, P.C.; see Docket No. 52	\$25,000.00
12/14/2021	Bank of Texas service fee	\$57.21
12/17/2021	Transfer to Debtor's previous bank account to cover payroll maintenance charge	\$61.83
	Total	\$25,119.04

EXHIBIT F

Total Receivables

Who Owes Money	Due Date	Amount
General Electric	09/07/2021	\$326,195.27



A division of BOKF, NA
P.O. Box 29775
Dallas, TX 75229-0775
Member FDIC

PRIMARY ACCOUNT
[REDACTED] 4034

Statement Period:
12-01-21 to 12-31-21

0026813 T0925201012206240600 00000 01 100000000 00181225 002 TEXRG1

WATTSTOCK LLC
DEBTOR IN POSSESSION CASE #21-31488
US BANKRUPTCY COURT NORTHERN DIST OF TEX
4040 N CENTRAL EXPRESSWAY SUITE 850
DALLAS TX 75204

Direct Inquiries To:
Comm'l Client Svcs
866-407-4147

www.bankoftexas.com

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BANKRUPTCY CHECKING

ACCOUNT: [REDACTED] 4034



Statement Period from 12-01-21 through 12-31-21

\$ Starting Balance	80,755.33
+ 1 Deposits	30.00
- 3 Checks & Withdrawals	25,119.04
- Service Fees	.00
= Ending Balance	55,666.29



DEPOSITS

Date	Amount
12-15 TRANSFER FROM CHECKING 8096223833	30.00



WITHDRAWALS

Date	Amount
12-01 CASH MANAGMNT WIRE OUT 001734 Munsch Hardt Kopf & Harr, PC 111014325BK OF TX Retainer	25,000.00
12-14 BANK OF TEXAS ANALYSIS 1	57.21
12-17 TRANSFER TO CHECKING 8095743793	61.83



FOR ACCOUNT BALANCING PROCEDURES, IMPORTANT INFORMATION AND ADDRESS CHANGES SEE REVERSE SIDE

Member FDIC

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A division of BOKF, NA
P.O. Box 29775
Dallas, TX 75229-0775
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PRIMARY ACCOUNT
[REDACTED] 4034

Statement Period:
12-01-21 to 12-31-21

WATTSTOCK LLC
DEBTOR IN POSSESSION CASE #21-31488
US BANKRUPTCY COURT NORTHERN DIST OF TEX
4040 N CENTRAL EXPRESSWAY SUITE 850
DALLAS TX 75204

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CHECKS

(* Indicates a break in check number sequence)
(RTND Indicates a RETURNED CHECK)

*** No Checks ***



DAILY ACCOUNT BALANCE

Date	Balance	Date	Balance	Date	Balance
11-30	80,755.33	12-14	55,698.12	12-17	55,666.29
12-01	55,755.33	12-15	55,728.12		

SERVICE FEE BALANCE INFORMATION

AVG LEDGER BALANCE	55,708.64	AVG COLLECTED BAL	55,708.64
MINIMUM LEDGER BAL	55,666.29		

